

MEDICAL NOTE

[Insert date]

To whom it may concern,

[Insert patient name] has been a patient of mine since [insert date] and has been diagnosed with [insert diagnosis]. **This letter is intended to be a formal medical note.**

Migraine is a disabling medical condition characterized by attacks of headache and neurological symptoms. The attacks can typically be treated effectively if treated early. Many children and adolescents can identify when a migraine is starting and may request to be allowed to take their medication(s), even if they do not yet appear to be in pain. If they are made to wait until the headache is severe, the medication(s) may not work well, thus resulting in increased school absence and decreased school performance.

There are several symptoms of migraine including head pain, nausea, vomiting, visual changes, dizziness, abdominal upset, and a host of other neurological symptoms such as tingling of the face, arms or legs. Treatments include preventive medication, acute medication, and coping techniques such as relaxation and breathing techniques.

When [insert name] begins to feel the onset of a migraine, acute medication must be taken VERY QUICKLY to prevent worsening and a prolonged headache. It would be helpful if there is somewhere quiet and dark [insert name] can go to rest for 30 – 60 minutes after [insert name] takes medication. With successful early treatment of a migraine attack, the goal is to return to school activities after this time.

At migraine onset, please administer the following medication(s) as I have prescribed:

1. NSAID: [insert medication name & dosing]
2. TRIPTAN: [insert medication name & dosing]
3. Analgesic: [insert medication name & dosing]
4. Anti emetic: [insert medication name & dosing]

Migraine can significantly impact school participation in different ways for each individual. In particular, migraine can impact attendance, ability to concentrate, and ability to focus on schoolwork for an extended period of time. It is requested that appropriate accommodations be put in place to ensure a successful school year for [insert name]. If [insert name] is having a migraine attack or frequent attacks, they should have a plan in place to help them with school activities at their own pace. Some people may require flexibility for deadlines, extended periods of time for tests, and a quiet space during the school day to take a break or rest. If a student has missed school, they should be supported to help them to catch up at their own pace.

Support from the social worker or guidance counsellor may help [insert name] deal with social and/or academic stressors in school which can be significant triggers for migraine. This type of support may also help [insert name] to develop their own unique individualized plan for school and missed work.

This medical note is valid until the end of the current school year. If you require any additional information, please contact me at the telephone number or email below. More information on migraine can be found at www.migrainecanada.org.

I appreciate your cooperation in helping support children living with migraine.

Sincerely,

[Insert doctor signature line]

This medical note is endorsed by:

